



Language and Borders Revisited Colonizing Language, Deporting Voice and Seeking Discomfort in Spanish Class

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Abstract

The article reviews the place of ethnic and national identity in the structure of other group identities, describes psychological mechanisms and phenomenon of self-awareness as a member of the ethnic entity, characterizes separatism as a destructive version of ethnogenesis, which contradicts state interests. Currently, a number of countries observe the flare of patriotic movements, which is tied to the development of public identity. However, local patriotism is the factor of not only consolidation but also of confrontation [up until demonstration of separatism]. Separatism acts as a destructive version of ethnogenesis because it expresses the demonstration of ethnos contradicting state interests. Conclusions about the availability of several directions in the development of socio-psychological background of the formation of ethnic separatism are made through the analysis of scientific literature and based on the conducted research.

Keywords: ethnic separatism, the socio-psychological basis of separatism, separatism in post-Soviet countries, separatism in Western and developing countries, ethnic identity.

Formulation of the problem in general and its connection with important scientific and practical tasks. The general development of the world community in XXI century is being real-

ized under the slogan of globalization, internationalization and general tolerance. Despite this, in many countries, regardless of their economic development, the level of culture and historical

longevity of the existence of the state, come to the fore the problems of ethnic confrontations: Chechen wars of 1994-1996, the war between Armenians and Azerbaijanis in Nagorno-Karabakh, the Yugoslav ethnic conflict, the Scottish independence referendum in 2014, and others.

Effectiveness of preventive disinfection, pest and rodent control measures is closely linked with the formation of hygienic knowledge, skills, rules of safety measures on epidemic population, refugees and soldiers. Execution of Population, Refugees, and military rules of personal hygiene depends on education, health and general level of culture of a particular person. Implementation of the rules of collective hygiene promotes the establishment of a safe sanitary-epidemiological status and provided with the active participation of the entire population, refugees and soldiers, medical personnel, effective sanitary and advocacy, vigorous activity sanitary brigades, local military and civil administration [1,8,12,14-18].

To ensure long-term safe sanitary-epidemiological situation in the ADC in the Donetsk and Lugansk regions and adjacent areas must be to educate the population, refugees and troops necessary sanitary-hygienic skills: food storage, water, waste disposal, providing possible means housing is unavailable for the pests, their methods mechanical gear and destruction; personal hygiene, prevention and control of head lice and scabies; affordable water

disinfection methods, objects, clothes, dishes, waste, use of personal hygiene and protection. To this end, in addition to talks and lectures, the best is the use of printed leaflets, booklets, articles, and lectures with the use of the media [1-5,11-16,20,21].

It is important to improve the organization of medical services for an early warning system, monitoring and control of the retrospective epidemiological analysis, assess the health background, laboratory studies, the justification of preventive measures, the forecast of the epidemiological situation on the territory of [1-8,11-22].

One of the functions GosSanEpidemNadzor and military medical services in the ADC in the Donetsk and Lugansk regions and adjacent areas is the choice of indicators to assess the effectiveness of preventive anti-epidemic measures [1-4,12,15,17,20,21]. The most powerful are common indicators of infectious diseases and the incidence of certain infectious diseases. An important indicator of the effectiveness of preventive anti-epidemic disinfection measures is the population density of the sources of infection and disease vectors (rodents, insects) [1-5,12,23,24].

Evaluating the effectiveness of preventive anti-epidemic disinfection measures carried out in accordance with the significance of the results in terms of cost-effectiveness of the service carried out disinfection. Return on preventive anti-epidemic disinfection measures compared with the costs that

may arise in the health and medical and preventive elimination of outbreaks of infectious and parasitic diseases among the population, refugees and soldiers [1-4,16,17,20,24].

Organization of activity of sanitary-epidemiological institutions in the ADC in the Donetsk and Lugansk regions and adjacent areas requires the development and implementation of a set of measures to ensure the viability of the security personnel and institutions. A special professional, organizational and psychological training of health workers disinfection service for the implementation of the basic tasks under the ADC in the Donetsk and Lugansk regions and adjacent areas. It is advisable to use the required set of documents, manuals, algorithms action order picking teams of specialists, pilings medical equipment for emergency military [1-4,12,17-19].

conclusion

1. War has always been accompanied by the emergence of epidemics of infectious and parasitic diseases occupy a significant proportion of the population, and military servicemen, and noncombat medical losses, sometimes superior to fighting, the share of irrecoverable non-combat losses were significant, which affected the combat capability of the troops.

2. In the war zones in the Donetsk and Lugansk regions and adjacent areas destroyed by life-support systems, significantly deteriorating living conditions of the civilian population, which significantly activates social and envi-

ronmental risk factors that lead to the emergence and development of an uncontrolled epidemic processes and determines the trend of the rapid spread of many infectious and parasitic diseases, gives compelling reasons to predict the occurrence of unfavorable and even emergency Sanit Arno-epidemiological status.

3. The poor and extremely sanitary-epidemiological state in the war zones in the Donetsk and Lugansk regions and adjacent areas (emergency military) is characterized by the occurrence of epidemics of highly contagious diseases and the group of diseases especially dangerous infections spread among populations of parasitic insects, creating a real threat to the sanitary epidemiological welfare of the Armed Forces of Ukraine as a result of contact with the public.

4. Creation of favorable sanitary and epidemiological situation in the areas of fighting in the Donetsk and Lugansk regions and adjacent areas among the local population and refugees ensures the preservation and strengthening of health of military personnel, the maintenance of sustainable sanitary conditions and a high level of combat capability of the armed forces.

5. During the fighting in the densely populated areas require strict compliance with sanitary, epidemiological and preventive measures for the organization of water supply, power, material equipment, both in the military, especially the individual units, and among the civilian population in

the combat zone, and places of temporary resettlement of people.

6. Favorable sanitary-epidemiological status of the population and refugees in war zones in the Donetsk and Lugansk regions and adjacent areas is determined by a constant effective implementation of leading complex of interrelated measures: sanitizing, disinfection in the organization of water supply, power seats, waste management, safety of medical epidemic services, public accommodations, and deployment of the armed forces, as well as level of hygienic knowledge and skills among them, Thus to provide sanitary-epidemiological well-being among the troops, and supports military and defense capability of the state in general.

7. Strategic and operational sanitary-epidemiological well-being in the areas of fighting in the Donetsk and Lugansk regions and adjacent areas is provided by active joint work of all medical and sanitary-and-epidemiologic institutions, disinfection service under the general direction of civil-military administrations.

8. The interaction between civilian health institutions, the military and the civil administration of the Donetsk and Luhansk regions, the leadership and the military medical service of the Armed Forces of Ukraine and their effective joint operations and its balance with socio-economic, financial and human resources of the state, special training of civil and military health care providers provide the ability to

functionally united in carrying out anti-epidemic services for villas to ensure sanitary and epidemiological welfare of the population and the troops.

9. The main contractor of the complex anti-epidemic measures of disinfection, regulated by the current legislation of Ukraine is a state structure - the sanitary-epidemiological service, as the leading element of support of sanitary and epidemiological welfare of the population and the troops in combat zones in the Donetsk and Lugansk regions and adjacent areas.

10. The activities of sanitary-epidemiological service in combat zones in the Donetsk and Lugansk regions and adjacent areas in accordance with its state character, organized and carried out while maintaining a fully peacetime objectives, vertical management, interaction with all involved ministries, agencies in accordance with the specific requirements, conditions and activities, which are caused by additional factors of epidemic risk in the territory and hostilities.

According to various estimates, today every fourth country in the world is facing the problem of separatism. Conflicts of this kind always bear political, economic, moral, ethical and, most importantly, the human dimensions. Our paper covers the national (ethnic) separatism, which has the largest circulation in the world and has a very negative effect on the destinies of individuals and social institutions.

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mation of civil proceedings in the countries of the former USSR. Although the manifestation of separatism is the acute problem of the modern socio-political situation in a number of post-Soviet countries such as Ukraine, Azerbaijan, Moldova, and OE, the sci-

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One of the most important factors in the development of the optical system of the eye is the accommodation. Of accommodation depends on the dynamic state of refraction, and from it, in turn, the central vision. Accommodating - this ability of the eye to change its optical installation within the space defined by the nearest points and further clear vision [15]. The physiological significance of the accommodation - a reflex change in the optical power of the eye. Stimulus regulating accommodative process, a contour image blur that is inaccurate when installing optical eye to the object in [8]. It is known that the condition of the accommodation in patients with emmetropia, myopia and hyperopia has its own characteristics. So conducted research status accommodative

function in people with different types of refractive errors,

Anisometropia with a small difference in refractive error between the two eyes - one of the manifestations of asymmetry in the body of the doubles - is widespread. According to the results of various studies, its frequency range, but within narrow limits. Robert W. Arnold Publish results of several studies that determined the frequency of occurrence anisometropia bolee1,5 diopters as a risk factor for development of amblyopia. Thus, according to Ottar et al, Anisometropia occurs in 0.9% of cases, research MEPEDS showed that 1.6% of the surveyed have Anisometropia, resulting BPEDS study received digit 1,5%, VIPS - 2,3% [19] Donohue showed anisometropia of 1.0 diopter or more for 0.66% of the children of preschool age [20] GK von Noorden et believes that hyperopic anisometropia - the most common risk factor for amblyopia [22,21]. Anisometropia with significant difference of refraction, especially concerning high ametropia of an eye, should be viewed as an anomaly development.

Goncharova SA et al. He believes that anisometropia to 1.5 diopters, ie one that does not lead to loss of vision, occurs more often than isometropia. To determine the frequency of anisometropia sponsored study was conducted among 1000 unselected refraction contingent individuals. Anisometropia was found in 54.8%, isometropia - at 45.2%. At prevailing

among persons with anisometropia refractive difference between the eyes it was small - 0.5-1.5 diopters and only 2.1% - 2.0 diopters or more [6]. When anisometropia frequency analysis at different refraction on the basis of inspection Anisometropia 300 children aged 3-15 years, hyperopic Anisometropia detected in 54.3% myopic - 36.6%, mixed at 9.1% [6]. Hyperopia is the most common type of refractive error among children, it is 50% of refractive disorders and often leads to the development of amblyopia, disruption of binocular function and development of asthenopia [17]. Features of the structure of an optical system with hyperopic refractive require constant maximum tone of the ciliary muscle [18]. ES Avetisov believes that the unilateral hyperopia due to lack of accommodation sided, onto the retina of one eye constantly has smudged objects that cause the relative sensory deprivation corresponding half of the visual system; accommodation disturbances can cause disorders of binocular vision and the subsequent appearance of strabismus and amblyopia [1,2,3]. Of course, asymmetric refraction changes the job accommodation apparatus.

There are many methods of assessing the state of the accommodative apparatus of the eye. In recent years, the clinical practice of the method of computing akkomodografii firmly established - an objective way to assess the function of the ciliary muscle, which reflects both qualitative and

quantitative indicators of accommodation. At the moment this method is of great practical interest for the study of the accommodation function [5], but in the Soviet literature there are only a few details about the state of the accommodation in patients with amblyopia anisometropic and hyperopic refraction obtained by akkomodografii [11-15].

The aim of our work was to study the characteristics of the accommodation of the amblyopic and fellow eye in children and adolescents with anizogipermotropicheskoy amblyopia using computer akkomodografii.

Material and methods

The present study is based on the analysis of clinical and functional state 192 eyes of 96 patients with anizogipermotropicheskoy amblyopia. The study involved the following tasks: assessment of accommodative response amblyopic and fellow eye to stimuli of different size analysis accommodative mikroflyuktuatsy (AMP) and the fellow eye amblyopic, stability assessment and akkomodogramm amblyopic fellow eye by analyzing the "passes" histograms.

The inclusion criteria for patients participating in this study were: patient age 5-9 years, the presence of hyperopic anisometropia, the presence of unilateral amblyopia moderate, absence of organic pathology of the eye and the visual analyzer, the absence of strabismus at the time of the survey and in the history of the presence of the central character fixation. The re-

fraction of the eye to better cycloplegic background was 2.4 ± 1.1 diopters, amblyopia - 5.1 ± 1.5 diopters. Maximum corrected visual acuity (BCVA) of the master's eye was 0.9-1.0, amblyopic - 0.2-0.3.

All patients except for general clinical methods akkomodografiya conducted a survey using autorefractometry function studies accommodation Righton Speedy-i (Japan). This device software allows you not only to record the value of the accommodative response, but also reflects the quality characteristics of the state of the ciliary muscle. As akkomodografa device allows to register graphically refraction change upon presentation of the visual stimulus at different distances as a histogram. Further quantities accommodative response to presented stimuli, expressed in diopters, akkomodograf performs frequency analysis accommodative mikroflyuktuatsy reflecting lens oscillations under the influence of the ciliary muscle tone oscillations

The study is conducted under conditions of mental and emotional rest and physical, monocular (for right and left eyes separately). In this case, the other eye should be closed in order to avoid attention okklyudorom translation from objects placed on the study eye at objects seen with the other eye. Initially, the device works as autorefractometer defining its own refraction of the eye. It is indicated in the histogram. The patient is then presented accommodative visual stimulus at

different distances from the eye -. From infinity to 20 cm on the instrument can evaluate the process of the ciliary muscle stress and its relaxation. At baseline conditions are weak relaxation +0.5 diopters, emmetropia then conditions and further is increased stepwise refractive stimulus to 0.5 D: - 0.5 diopters, -1.0 diopters, -1.5 diopters, -2, 0 diopters, etc. possibly up to - 5.0 diopters,

During refractometer research continuously measures the refraction of the eye is presented against the back-

ground of the load. This determines the accommodative response - the ability to capture the accommodation facility at a certain distance from the eye. This data is fed to a computer, where they are processed and displayed in the form of histograms. Akkomodograf works step by step. Step is repeated measurement of eye refraction, namely determining accommodative response at a certain value accommodative stimulus (AC). AU single step different from the previous step AU -0.5 diopters [5].

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